

O.C.  
215  
AG

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE          |
|---------------------|----------|--------|---------------|
| FEE DETERMINATION   | SL       | 64801  | 11/30         |
| O.I.P.E. CLASSIFIER |          | 16     | 12699         |
| FORMALITY REVIEW    | TR       | 70034  | 1205<br>21100 |

INDEX OF CLAIMS

|                     |            |   |              |
|---------------------|------------|---|--------------|
| ✓                   | Rejected   | N | Non-elected  |
| =                   | Allowed    | I | Interference |
| — (Through numeral) | Canceled   | A | Appeal       |
| ÷                   | Restricted | O | Objected     |

| Claim | Date             |
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| 1     | Original 6/22/01 |
| 2     | ✓ 7/29/04        |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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